



11-09-06

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit: 3635

Examiner: Jeanette E. Chapman

"Express Mail" Mailing Label Number: EV958477677US

In Re.: **Robert H. Ray et al.**

Date of Deposit: 11/07/2006

Ref: Case Docket No.: **RAY-001**

Serial No.: **10/646,021**

Filed: **08/22/2003**

Subject: **Pole Anchor Footing System**

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

**PETITION FOR EXTENSION OF TIME TO RESPOND
UNDER 37 CFR § 1.136**

Applicant hereby petitions for an extension of time of one (1) month, to respond to the office action letter mailed in the above-referenced case on 07/10/2006, for which a 3-month shortened statutory period was set to expire on 10/10/2006. This requested extension extends the time for response to 11/10/2006.

- ☒ The petitioner is an established small entity.
- ☒ A check is enclosed which includes \$60.00 for the extension fee.

Respectfully submitted,
Robert H. Ray et al.

By /Donald R. Boys/
Donald R. Boys
Reg. No. 35,074

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Central Coast Patent Agency
3 Hangar Way Suite D
Watsonville, CA 95076
(831) 768-1755



Method of Transmission: EV958477677US

CASE DOCKET NO. RAY-001

In reference to application of Robert H. Ray et al.

Serial No. 10/646,021

For Pole Anchor Footing System

Sir:

Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

- ☐ No additional fee is required.
☒ Applicant claims Small entity status under 37 CFR 1.27.
☒ The fee has been calculated as shown below.

**** CLAIMS AS AMENDED ****							
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Paid For Previously	(5) Present Extra	(6) Rate Small Entity	(7) Rate Large Entity	(8) Additional Fee
Total Claims	6	Minus	** 20	0	\$ 25	\$ 50	\$ 0.00
Indep Claims	1	Minus	*** 3	0	\$ 100	\$ 200	\$ 200.00
<input type="checkbox"/> First presentation of a multiple dependent claim					\$ 0	\$ 0	\$ 0.00
<input type="checkbox"/> Terminal Disclaimer Fees							\$ 0.00
Extension Fee	<input checked="" type="checkbox"/> 1st Month		<input type="checkbox"/> 2nd Month		<input type="checkbox"/> 3rd Month		\$ 60.00
Total additional for claims, time extensions and disclaimer fees							\$ 60.00

** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Multiple dependencies, if any, included in the above calculation.

* If the entry in column 2 is less than the entry in column 4, write "O" in column 5.

☒ A check in the amount of 60.00 is attached.

☐ Charge \$ 0.00 to deposit account 50-0534 . (A duplicate of this sheet is enclosed)

☒ Please charge any additional fees or credit overpayment to Deposit Account 50-0534 . A duplicate of this sheet is enclosed.

Respectfully Submitted, /Donald R. Boys/

Donald R. Boys
Reg. No. 35074

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